



# Declaration and Power of Attorney Patent Application (Design or Utility)

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As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: 'Mosaic infectious bursal disease virus vaccines'

the specification of which

- ☐ is attached hereto
- ☒ was filed on January 14, 2002 as application serial no. 10/046,671  
and or PCT International Application number PCT/NL00/00493 and was amended  
on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information know to me to be material to patentability as defined in 37 C.F.R. §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or 35 U.S.C. §365(b) of any foreign application(s) for patent or inventor's certificate, or 35 U.S.C. §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate of PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)		
Number 99202316.8	Country EP	Day/Month/Year Filed 14-07-1999
Number	Country	Day/Month/Year Filed
Number	Country	Day/Month/Year Filed

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:

<b>Prior Provisional Application(s)</b>	
<b>Serial Number</b>	<b>Day/Month/Year Filing Date</b>
<b>Serial Number</b>	<b>Day/Month/Year Filing Date</b>
<b>Serial Number</b>	<b>Day/Month/Year Filing Date</b>

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or under 35 U.S.C. §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

<b>Prior U.S. or International Application(s)</b>		
<b>Serial Number</b>	<b>Day/Month/Year Filed</b>	<b>Status</b> (patented, pending, abandoned)
<b>Serial Number</b>	<b>Day/Month/Year Filed</b>	<b>Status</b> (patented, pending, abandoned)
<b>Serial Number</b>	<b>Day/Month/Year Filed</b>	<b>Status</b> (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.



## Power of Attorney

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

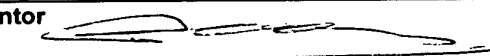
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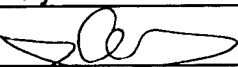
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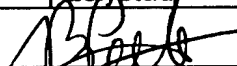
I hereby authorize them or others whom they may appoint to act and rely on instructions from and communicate directly with the person/organization who/which first sends this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instructed otherwise.

Please direct all correspondence in this case to at the address indicated below:

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PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Boot et al.

Serial No.: 10/046,671

Filed: 1/14/2002

For: MOSAIC INFECTIOUS BURSAL  
DISEASE VIRUS VACCINES

Confirmation No.: 9315

Examiner: To be assigned

Group Art Unit: 1642

Attorney Docket No.: 2183-5238US

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## CERTIFICATE OF MAILING

I hereby certify that this correspondence along with any attachments referred to or identified as being attached or enclosed is being deposited with the United States Postal Service as First Class Mail on the date of deposit shown below with sufficient postage and in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231.

4-25-02  
Date

Signature

Lynette Eliason  
Name (Type/Print)

## ASSOCIATE POWER OF ATTORNEY

Commissioner for Patents  
Washington, D.C. 20231

Sir:

In accordance with 37 C.F.R. § 1.34(b), please recognize the following individual as an associate agent/attorney herein in connection with the above-identified patent application, and with all continuing and divisional applications hereof:

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Respectfully submitted,

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